NEVADA DEPARTMENT OF CORRECTIONS	SERIES 600 HEALTH CARE SERVICES	SUPERSEDES: AR 623 (09/09/02)
ADMINISTRATIVE REGULATIONS MANUAL	ADMINISTRATIVE REGULATION 623 HEALTH CARE FOR WOMEN	EFFECTIVE DATE: 10/10/03

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MANDATORY REVIEW DATE 09/09/04

PURPOSE

To describe the additional medical services available for the health care of women within the Department.

AUTHORITY

NRS 209.131

NRS 209.381

NRS 209.385

RESPONSIBILITY

All staff of the Department who supervise and manage female inmates has the responsibility to have knowledge of and comply with this regulation.

DEFINITIONS

DIAGNOSTIC CARE – Tests and examinations performed to determine a disease process.

SCREENING CARE – Tests and examination designed to detect conditions where such testing has been shown to be appropriate and in asymptomatic patients.

SUPPORTIVE CARE – Care provided to assist the inmate in coping with a physical or mental disorder.

THERAPEUTIC CARE – Treatment given for a specific physical or mental disorder.

APPLICABILITY

Applies to all female inmates housed within the Department.

PROCEDURES

623.01 HEALTH CARE FOR WOMEN

- 1.1 Female inmates will be provided appropriate medical care to include screening, diagnostic, therapeutic, and supportive care for those medical problems particular to women. Specific health services available to female inmates include, but are not limited to: (3-4343)
 - Pre-natal and post-natal care performed in consultation with an obstetrician, including the management of chemically addicted pregnant inmates.
 - Birthing at an appropriate hospital setting.
 - Family planning services which may include the availability of contraceptives prior to release from prison.
 - Abortions will be available for specific medical conditions or as otherwise described in Health Care Institutional Procedure # 101, Abortions.
 - Gynecology consultations and/or procedures will be provided for specific female disorders or to assist in the diagnostic evaluation or therapeutic intervention for these disorders as determined by the Department's Medical Staff and approved by the Medical Division Utilization Review Panel.
 - Pap smears every two years for women under the age of 45 and annually thereafter.

REFERENCES

ACA Standard 3-4343

ATTACHMENTS

None.

Jackie Crawford, Director	Date
Ted D'Amico, D.O., Medical Director	Date
$\begin{array}{ccc} \textbf{CONFIDENTIAL} & & \underline{XX} \\ \hline \textbf{Yes} & & \textbf{No} \end{array}$	

THIS PROCEDURE SUPERSEDES ALL PRIOR WRITTEN PROCEDURES ON THIS SPECIFIC SUBJECT.